

VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm Breath Test Instrument

NOV 02 2009

State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Supervisor/Operator Performing the Verification Procedure:	
Name <u>JAMIES MICHELIS</u>	ID# <u>6502</u> Date <u>11/4/09</u>
A Agency <u>USBD</u>	Phone # <u>852-6111</u>
Instrument Location <u>BARROW - SQUAD ROOM</u>	
Alco S/N <u>X301568</u> Target Value <u>.084</u> High Pressure <u>900</u>	
B Alco Test Values	<u>.084</u> <u>.085</u>
	1 st Alco 2 nd Alco
Signature <u>[Signature]</u>	
(OVER)	

BMB
11/4/09

(Do Not write in the area below)

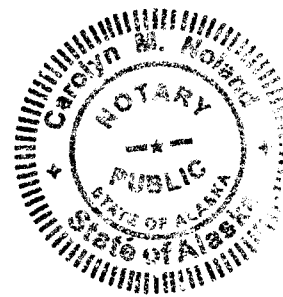
I, Nita J. Bolz, after being first duly sworn, depose and state as follows:

- (1) I am a Forensic Scientist IV at the State of Alaska Scientific Crime Detection Laboratory.
- (2) The Alaska Scientific Crime Detection Laboratory is an entity within the Department of Public Safety.
- (3) I am the Scientific Director of the State Breath Alcohol Program.
- (4) In that capacity, I am responsible for overseeing the breath alcohol program, including assuring that persons responsible for verifying the calibration of instruments are properly trained and qualified. I also am responsible for maintaining the records of the program.
- (5) The attached verification is a true and accurate verification of calibration that reflects a regularly conducted and regularly recorded activity of the breath alcohol program performed by a person trained and qualified to conduct the verification.
- (6) The referenced instrument is certified for evidentiary use in the State of Alaska.

[Signature]
Nita J. Bolz
Scientific Director
State Breath Alcohol Program

Subscribed and sworn before me this 21st day of Dec, 2009.

[Signature] (Notary Seal Stamp)
Carolyn M. Noland
Notary Public, State of Alaska
Commission Expires with Office



VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm breath Test Instrument

State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

DataMaster cdm S/N 130129

(CONTINUED FROM FRONT PAGE)

C TAPE THE TEST STRIP FROM THE NONDRINKING SUBJECT TEST AND THE DIAGNOSTIC CHECK IN THE MARKED BOXES.

NONDRINKING SUBJECT TEST

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130129

NOVEMBER 04, 2009

OPERATOR'S NAME: *BWMB*
MICHELS/JAMES/D
OPERATOR'S NUMBER: 6502
SUBJECT'S LAST NAME: *11/14/09*
VOC
SUBJECT'S FIRST NAME/NI :
VOC
O.L. #: VOC
DEPT/AGENCY: DRWI
CASE/REPORT: VOC
TEST TYPE: V
ALCO TARGET VALUE: .004
ALCO S/N: X301568

— BREATH ANALYSIS —

.004 ADJUSTED FOR 30.17 in		
ALCO TARGET	.004	07:48
BLANK TEST	.000	07:49
INTERNAL STANDARD	VERIFIED	07:49
ALCO TV 30.17 in	.004	07:49
BLANK TEST	.000	07:50
SUBJECT SAMPLE	.000	07:51
BLANK TEST	.000	07:51
ALCO TV 30.17 in	.005	07:52
BLANK TEST	.000	07:52

DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130129

NOVEMBER 04, 2009
TIME 07:46

— DIAGNOSTIC CHECK —

COMPUTER:	OKAY
PROGRAM:	OKAY
SOFTWARE DATE:	01/08/09
HEATERS	
SAMPLE CHAMBER:	49c
BREATH TUBE:	41c
BAROMETER:	30.17 in
FLOW DETECTOR:	OKAY
HIGH SPEED:	OKAY
DETECTOR:	OKAY
FILTERS:	OKAY
QUARTZ STANDARD:	OKAY
CALIBRATION:	OKAY

PRINTER TEST

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HIJKLMNOPQRSTUVWXYZ[\]^_`abcde fghijklmno
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